

Milwaukee Water Works

Safe, Abundant Drinking Water.

BUYER INFORMATION FORM -- For Use at the CLOSING TABLE or FOR A TENANT CHANGE

Please complete this form and return it to the Milwaukee Water Works:

- Fax: (414) 286-5452
- Email: watwebcs@milwaukee.gov
- By mail or in person to the Milwaukee Water Works Customer Service Center,
841 N. Broadway, Room 406, Milwaukee 53202; Monday-Friday, 7:30 a.m. – 5:00 p.m.
- Telephone: (414) 286-2830

Customer Name _____

Customer Phone No. _____

Milwaukee Water Works Account No. _____

Property Address _____

(If more than one address will be authorized, attach a separate listing of individual Milwaukee Water Works account number and property address.)

To change your billing address, please complete the form below Signature of Customer*

Meter Reading _____ **Date of Meter Reading** _____

Signature of Customer _____ **Date** _____
(Must be signed by the customer)

***To change your billing address, please complete this information:**

I, as the owner or the owner's authorized agent, request that until further notice, the Municipal Services Bill (also known as "water bill") for the above property be mailed to the following name and address:

Bill to Name _____

Bill to Address _____
(Street, City, State, ZIP Code)

Contact Phone No. _____

INTERNAL PROCESSING -- To be completed by the Milwaukee Water Works ONLY

Date Received _____
CSR Initials _____

Date Processed _____
Method of Receipt In Person - Email - Fax *(Circle One)*

Revised 7/29/13

